

SERFF Tracking Number:	PALD-125695287	State:	Arkansas
Filing Company:	Pacific Life Insurance - Life Division	State Tracking Number:	39310
Company Tracking Number:	E08TQL		
TOI:	L08 Life - Other	Sub-TOI:	L08.000 Life - Other
Product Name:	E08TQL		
Project Name/Number:	E08TQL/E08TQL		

Filing at a Glance

Company: Pacific Life Insurance - Life Division

Product Name: E08TQL

TOI: L08 Life - Other

Sub-TOI: L08.000 Life - Other

Filing Type: Form

SERFF Tr Num: PALD-125695287

SERFF Status: Closed

Co Tr Num: E08TQL

Co Status: Pending State

Response-Initial Submission

Author: Jill Dease

Date Submitted: 06/16/2008

State: ArkansasLH

State Tr Num: 39310

State Status: Approved-Closed

Reviewer(s): Linda Bird

Disposition Date: 06/18/2008

Disposition Status: Approved

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name: E08TQL

Project Number: E08TQL

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 06/18/2008

State Status Changed: 06/18/2008

Corresponding Filing Tracking Number: E08TQL

Filing Description:

Re: Form R08CCT, Annual Renewable Term Rider

Form E08TQL, Endorsement

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Deemer Date:

We are submitting the above referenced individual (non-group) life insurance forms in final print for your approval. This filing is to correct errors in recently filed forms, none of which have yet been issued. Form R08CCT removes the "Coverage Charge" which is not present in the underlying product, and was included in the rider language inadvertently. This is a rider that provides term insurance coverage on the primary insured under Flexible Premium Variable Universal

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Life forms P08CC6 and P08CC7, both approved in your state. Form E08TQL corrects the Tax Qualification as Life Insurance provision in the two policy forms referenced above, as well as in two additional Flexible Premium Variable Universal Life forms, P08SE4 and P08MVP, both approved in your state. With your approval, we will include the corrected provision in the referenced policies, none of which have yet been issued. This filing is being submitted in Nebraska, our state of domicile, and in all other states where Pacific Life is licensed, where such filing is required.

The following pertain to this submission:

- Issue Ages are unchanged on the underlying forms.
- Any required certification forms are included.
- Actuarial memorandum is not included with this filing, as these forms correct existing filings and the actuarial memorandum for those filings is unchanged.
- The forms are variable life forms, and thus exempt from readability requirements.
- The forms will be marketed through our licensed agents. The target release is 8/1/08 or 11/1/08.
- The forms will be used with primarily with approved application # A06IUW.
- If a filing fee is required, it is included, or you will bill us, as appropriate.
- For those states having adopted the NAIC Model Illustration Regulation, please note that this filing is exempt from the requirements (Illustrations Actuary's Certification, etc.) of the regulation since the forms affect variable policies only.
- No bracketed material is included with this filing, so there is no Statement of Variability needed.

To the best of my knowledge and belief this filing complies with the laws and regulations of your state. If you would like to discuss any aspect of this filing, please feel free to contact me at (800) 800-7681, extension 7081.

Sincerely,

Jill Dease

Product Analyst, Product Compliance, Life Division

Company and Contact

Filing Contact Information

Jill Dease, Compliance Analyst

Jill.Klinger@pacificlife.com

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700 Newport Center Drive	(949) 219-3618 [Phone]
Newport Beach, CA 92660	(949) 219-4304[FAX]

Filing Company Information

Pacific Life Insurance - Life Division	CoCode: 67466	State of Domicile: Nebraska
700 Newport Center Drive	Group Code: 709	Company Type:
Newport Beach, CA 92660	Group Name:	State ID Number:
(949) 219-3118 ext. [Phone]	FEIN Number: 95-1079000	

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Filing Fees

Fee Required?	Yes
Fee Amount:	\$40.00
Retaliatory?	No
Fee Explanation:	\$20.00 per form (if no policy is filed) 2 forms = \$40.00
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Pacific Life Insurance - Life Division	\$40.00	06/16/2008	20918741

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Linda Bird	06/18/2008	06/18/2008

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Disposition

Disposition Date: 06/18/2008

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice		No
Supporting Document	Application		No
Form	Endorsement		Yes
Form	Annual Renewable Term Rider		Yes

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Form Schedule

Lead Form Number: E08TQL

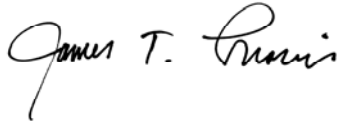
Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	E08TQL	Certificate	Endorsement Amendmen t, Insert Page, Endorseme nt or Rider	Initial		0	E08TQL.pdf
	R08CCT	Certificate	Annual Renewable Amendmen Term Rider t, Insert Page, Endorseme nt or Rider	Revised	Replaced Form #: R08CCT Previous Filing #:	0	R08CCT.pdf

Endorsement

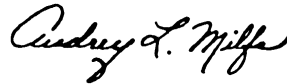
This endorsement modifies the policy to which it is attached, as follows: The Tax Qualification as Life Insurance provision is hereby replaced by the following:

Tax Qualification as Life Insurance - This policy is intended to qualify as a life insurance contract for federal tax purposes, and the Death Benefit under this policy is intended to qualify for federal income tax exclusion. The policy, including any rider, benefit or endorsement, shall be interpreted to ensure and maintain such tax qualification, despite any other provision to the contrary. **As of the effective date of the filing of this policy in the state in which it was delivered, the Internal Revenue Service has not issued any official guidance on the tax treatment of life insurance policies that continue coverage beyond Age 100. You should consult your tax advisor, as there may be tax consequences.**

Signed for Pacific Life Insurance Company.

Handwritten signature of James T. Harris in black ink.

Chairman, President and Chief Executive Officer

Handwritten signature of Audrey L. Miller in black ink.

Secretary

ANNUAL RENEWABLE TERM RIDER

This Rider ("Rider") becomes a part of the policy to which it is attached ("the Policy"). All terms of the Policy that do not conflict with this Rider's terms apply to this Rider.

Rider Benefit Summary – This Rider provides additional coverage on the Insured under the Policy as long as the Policy is In Force and this Rider has not terminated. The Face Amount of this Rider contributes to the Total Face Amount, and consequently to the Death Benefit, of the Policy. This rider has no Accumulated Value of its own, but affects the Policy's Accumulated Value because the charges for the Rider are deducted from the Accumulated Value of the Policy.

Insured – As used in this Rider, the "Insured" means the individual covered under the Policy's Basic Coverage, as shown in the Policy Specifications.

Rider Coverage Layer – is a layer of insurance coverage under this Rider. There may be one or more Rider Coverage Layers. Any elective increase in Rider Face Amount will comprise a new Rider Coverage Layer. Each Rider Coverage Layer has its own Face Amount, Risk Class, effective date, and set of charges. The Face Amount, Risk Class, effective date, and set of charges for the initial Rider Coverage Layer are shown in the Policy Specifications. The Face Amount, Risk Class, effective date, and set of charges for any Rider Coverage Layer added at a later time will be shown in a Supplemental Schedule of Coverage sent to you at that time.

Rider Face Amount – The Face Amount of this Rider is the sum of the Face Amounts of all Rider Coverage Layers.

Elective Increases in Rider Face Amount – Elective increases in the Face Amount of this Rider are increases that you apply for after the Policy has been issued.

You may submit an application to increase the Rider Face Amount. Your application must include Evidence of Insurability satisfactory to us and is subject to our approval. The effective date of the increased Rider Face Amount will be the first Monthly Payment Date on or next following the date all required conditions are met or any other date you request and we approve. We reserve the right to limit increases to one per policy year and to charge a fee, not to exceed \$100, to evaluate insurability. Upon approval of any such increase, we will send you a Supplemental Schedule of Coverage, which will include the following information:

- the increased Rider Face Amount and the effective date of the increase;
- the Risk Class for the increase;
- the Maximum Monthly Cost of Insurance Rates applicable to the increase; and
- if the Guideline Premium Test is used, the new Guideline Premiums.

Decrease in Rider Face Amount – You may decrease the Rider Face Amount, subject to the provisions in the Policy. If there are Coverage Layers with the same effective date, they will be decreased or eliminated in the following order:

- first, the Face Amount of this Rider will be decreased or eliminated;
- then, the Face Amount of any other Rider that contributes to the Total Face Amount will be decreased or eliminated; and
- finally, the Face Amount of Basic Coverage under the Policy will be decreased.

Charge for this Rider – On each Monthly Payment Date prior to the Monthly Deduction End Date, there is a charge for this Rider equal to the Rider Cost of Insurance Charge. Such charge may vary by Class, and for the purpose of this Rider, Class includes the Policy form to which this Rider is attached.

Rider Cost of Insurance Charge – The Cost of Insurance Charge for this Rider is the sum of the Cost of Insurance Charge for each Rider Coverage Layer. The Cost of Insurance Charge for each Rider Coverage Layer is equal to (1) multiplied by (2), where:

- (1) is the Maximum Monthly Cost of Insurance Rate for the Coverage Layer divided by 1000; and
- (2) is the Net Amount at Risk allocated to the Coverage Layer.

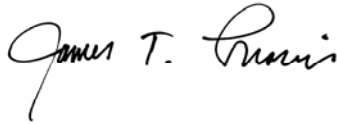
The Net Amount at Risk is allocated proportionately to each Coverage Layer of this Rider and to Basic Coverage under the Policy, according to Face Amount.

Conversion – This Rider is not convertible.

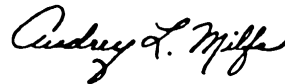
Effective Dates – This Rider is effective on the Policy Date unless otherwise stated. It will terminate on the earlier of:

- your Written Request;
- the date the Rider or the Policy ceases to be In Force.

Signed for **Pacific Life Insurance Company,**



Chairman, President and Chief Executive Officer



Secretary

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Rate Information

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